STATE OF GEORGIA

RECORDS RETENTION SCHEDULE APPLICATION

Sheet: 1 of 2

Schedule #:2001-0002 Effective Date: 2/21/2001

(Agency use)

(Archives use)

Date:

February 14, 2001

Date Received:

February 14, 2001

Control No.:

N/A

Agency Code:

0467

Control No.:

Applicant:

Georgia Department of Corrections

Address:

2 M.L. King, Jr. Dr., Atlanta, GA 30334

Phone: (404) 651-9905

FAX: (404) 463-6286

Email:

Creating

Internal Investigations Division

Office:

Address:

2 Martin Luther King Jr. Dr., 8th Floor, East

Tower, Atlanta, Ga 30334

Phone: (404) 656-4604

FAX:

Email:

Administrator:

James Doctor

Phone: (404) 656-4604

FAX Email

Application

Type:

New: X

Amend:

One-time: Exception:

Excebioi

Class:

Individual

Series Title:

Incident Reports

Dates of Series:

January 1, 1990 and on-going

Access:

Confidential State Secret, O.C.G.A. 42-5-36 © (tab 2). GDC Rules and Regulations 125-1-

1-.09. Records Amended.

Function

Documented:

Incident reports are reviewed for severity by Superintendents of each facility and forwarded up the chain of command for further review and investigation when necessary. The Internal Investigations Division is responsible for reviewing incident reports and conducting investigations, when necessary, of misfeasance, malfeasance, and criminal activity of state

inmates, employees, and those within the jurisdiction of the Georgia Department of Corrections. If the incident requires an investigation, the Incident Report becomes a part of an "Investigation File" which is maintained indefinately. The retention of the investigation file is controlled by GDC Retention schedule # 77-68A. GDC Standard Operating Procedures IIA04-0001, IIA04-0002, IVF01-0109, IIA07-0006. GDC Rules and Regulations 125-3-1-

.01, 125-3-1-.07, 125-3-2-.05, 125-1-2-.01

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Sheet: 2 of 2

Schedule #:2001-0002 Effective Date: 2/21/2001

1.00	sists	

Incident Reports relating to inmates and Departmental personnel containing statements of those concerned reflecting circumstances of incident by inmate, personnel, and summary

log.

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8 1/2 X11, 8 1/2 X14 paper in manilla folders

Arrangement:

Chronologically by year and alphabeticially by Institution or Office Name

indexed by:

Chronologically by year and alphabetically by Institution or Office Name

Retention Requirement:

State Law or Regulation:

Federal Law or Regulation:

Audit Period:

Administrative Need:

Temporary Record. Retain for 3 years

Cut Off Event:

Fiscal Year

Total

Retention:

3 years

The above retention period is consistent with the requirements of the Georgia Records Act (O.C.G.A. 50-18-90 et seq.). We submit this retention schedule to the State Records Committee with the recommendation that it be approved for the named record series.

Authorized by: Jim Wetherington, Commissioner	3/2/6/ pate
Concur: James Doctror, Facilities Division Director	2 /2 8 / Ø / /Date
Submitted by: Dorothy Farmer Records Manager	2 28 200 Date
The State Records Committee approves this recommende series by the named creating office.	d retention period for the named records
Sigr.ed:	3/6 (o (Date